

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.
Account Number : 110432003053
Phone : (561)694-8107
Fax Number : (561)214-8442

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**LLC REGISTERED AGENT CHANGE
LIVEOAK FIBER OF FLORIDA, LLC**

| | |
|-----------------------|---------|
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MAY 01 2013

K. Brumbach

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: LIVEOAK FIBER OF FLORIDA, LLC

2. (a) 1501 MERCHANTS WAY (b) 1501 MERCHANTS WAY
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

NICEVILLE, FL 32578

NICEVILLE, FL 32578

08/09/2022

M22000012595

3. Date of filing/registration in Florida 4. Document number

5. (a) STERLING BUSINESS LAW
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

3250 GRAND AVE., STE. 202

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

MIAMI FL 33133

(b) Corporate Creations Network Inc.
Enter name of NEW Registered Agent and/or NEW Registered Office address:

801 US Highway 1

NEW Registered Office Address:

North Palm Beach FL 33408

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Erin Saville
Signature of a member or authorized representative of a member

Erin Saville, Attorney-In-Fact

Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Erin Saville Erin Saville, Special Secretary
Signature of Registered Agent

2023 APR 28 PM 2:48